

## STATE OF WASHINGTON

## WASHINGTON STATE BOARD OF HEALTH

1102 SE Quince Street • PO Box 47990 Olympia, Washington 98504-7990

February 12, 2003

The Honorable Eileen Cody, Chair House Health Committee Post Office Box 40600 337 John L. O'Brien Bldg. Olympia, Washington 98504-0600

Dear Representative Cody:

I am writing as chair of the Washington State Board of Health to support the concept of House Bill 1638, which is scheduled for a hearing before your committee today. I also would like to recommend an amendment.

The legislation would require the Department of Health (DOH) to develop a state prevention and management plan for hepatitis C (HCV). HB 1638 would authorize the State Board of Health to adopt rules necessary to implement the plan. This is an appropriate responsibility for the Board, which is charged with making rules to control the spread of communicable diseases under RCW 43.20.050(e) and sexually transmitted diseases, including HIV, under chapter 70.24 RCW.

The current bill would require that the state prevention and control plan assess the ability of HIV testing centers to provide "anonymous and confidential" testing for HCV. Anonymous testing and confidential testing are distinct and exclusive practices. Anonymous testing for HIV is an exception to common practice for the control and treatment of communicable disease. There is scientific research to support this exceptionalism for HIV, but not for HCV, which unlike HIV is curable in many instances. The Board recommends striking the words "anonymous and" from Sec. 1, subsection 2(e) on page 2, line 21.

The Board, at the request of the Washington State Association of Local Public Health Officials (WSALPHO), agreed in December to review its HIV rules under the 1988 AIDS Omnibus Act. This review will occur in collaboration with DOH and various stakeholders. The work may include exploring the advisability of expanding the scope of those rules to encompass other blood borne pathogens, particularly HCV, which the Board recognizes is a major emergent health issue. The Board believes it has sufficient rule making authority under existing communicable disease and sexually transmitted disease statutes, but this bill would strengthen that authority by explicitly authorizing Board rule making around the specific HCV prevention and control activities called for by this legislation.

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Should a version of HB 1638 become law, the Board would look forward to consulting with DOH on the development of the plan and engaging in rule making necessary for its implementation within available appropriations.

Sincerely,

Linda Lake

Chair, Washington State Board of Health

cc: House Health Care Committee Members

Representative Shay Schual-Berke

Senator Jim Kastama

Washington State Board of Health Members

Don Sloma, State Board of Health

Mich'l Prentice Needham, Governor's Office of Health Policy

Mary Selecky, Department of Health

Patty Hayes, Department of Health